

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Meissner et al.

Application Number: 09/393,023

Group Art Unit: 1647

Filed: September 9, 1999

Examiner: Spector, L.

Title: Human Criptin Growth Factor

Attny. Docket No.: PF200D1

## RESPONSE AND AMENDMENT UNDER 37 C.F.R. § 1.111

Commissioner for Patents Washington, D.C. 20231

Dear Sir:

In response to the outstanding Office Action (Paper No.28) mailed January 8. 2003, please consider the following amendments and remarks. Applicants submit concurrently herewith: (a) a Fee Transmittal, with appropriate fee; and (b) a Version With Markings to Show Changes Made.

Please amend the application as follows:

## In the Claims:

Please cancel claims 14, 16, 19-20, 29-32, 41, 54-68, and 76-79 without prejudice or disclaimer.

Please amend the claims as follows:

21. (Once Amended) An isolated protein comprising a polypeptide having an amino acid sequence selected from the group consisting of:

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- (a) amino acid residues 1 to 223 of SEQ ID NO:2;
- (b) amino acid residues 1 to 173 of SEQ ID NO:2;
- (c) amino acid residues 24 to 223 of SEQ ID NO:2;
- (d) amino acid residues 24 to 67 of SEQ ID NO:2;
- (e) amino acid residues 24 to 173 of SEQ ID NO:2;
- (f) amino acid residues 45 to 128 of SEQ ID NO:2; and
- (g) amino acid residues 68 to 173 of SEQ ID NO:2.

168.00

PF200D1

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APR 0 4 2003 Surder the Paperwork Reduction Act of 1995, no persons are requ	ired to a	respond	to a coll	ection o		for use through 10/31/ unless it displays a val	/2002. OM	B 0651-0034	<b>Z</b>
8						lete if Known		1-	]
FEE TRANSMITTAL		Application Number 09/393,023-Conf. #2146					]		
for FY 2003		Filing Date				September 9, 199			]
Patent fees are subject to annual revision.		First Named Inventor			ntor I	Paul S. Meissner			]
	-	Examiner Name L. S			L. Spector			J	
Applicant claims small entity status. See 37 CFR 1.27		Group / ut Gritte			<u> </u>	20			
TOTAL AMOUNT OF PAYMENT (\$) 168.00		Attorney Docket No. PF200D1					<b>©</b>	$\Omega$	
METHOD OF PAYMENT (check all that apply)				FEE	CALCUL	ATION (continued)	IJ	<b>6</b>	
Check Credit Money Other None	3. ADDITIONAL FEES					1600/296	2003		
X Deposit Account	Large	Large Entity Small Entity			53				
Deposit Account 08-3425	Fee	Fee	Fee	Fee	-	Fee Description	පි		
Number	Code	(\$)	Code	(\$)		ree bescription		Fee Paid	
Account Human Genome Sciences, Inc.	1051	130	20,51	65	Surcharge -	late filing fee or oath			'
Name The Commissioner is hereby authorized to: (check all that apply)	1052	50	2052	25	Surcharge – sheet.	· late provisional filing fe	ee or cover		
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English	specification			
Charge any additional fee(s) during the pendency of this application	1812	2,520	1812	2,520	2,520 For filing a request for ex parte reexamination				
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Requesting Examiner a	sting publication of SIR prior to ner action			
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting	sting publication of SIR after			l
FEE CALCULATION	1251	110	2251	55	Examiner as Extension for	ction or reply within first mont	h	$\vdash$	
1. BASIC FILING FEE	1252	410	2252	205	Extension fo	or reply within second m	onth		1
Large Entity Small Entity	1253	930	2253	465	Extension fo	or reply within third mon	th		1
Fee Fee Fee Fee Fee Fee Description Fee Paid	1254	1,450	2254	725	Extension fo	or reply within fourth mo	onth		ļ
1001 750 2001 375 Utility filing fee	1255		2255	985		or reply within fifth mont	h		
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Ap	•			
1003 520 2003 260 Plant filing fee 1004 750 2004 375 Reissue filing fee	1402 1403		2402	160 140	-	f in support of an appea oral hearing	11		1
1005 160 2005 80 Provisional filing fee	1451		1451		•	stitute a public use pro	ceeding		
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501		2501	650	•	fee (or reissue)			ļ
Claims below Fee Paid	1502		2502	235	Design issu				Ì
Total Claims 71 -79** =	1503 1460		2503		Plant issue				
Claims 0 -0 - 2 x 04.00 - 108.00	1807		1460	130 50		the Commissioner fee under 37 CFR 1.17	(a)		
Multiple Dependent	1806		1806	180	•	of Information Disclosu	,	<u> </u>	
Fee Fee Fee Fee For For Provintion						each patent assignment			
Code (\$) Code (\$) Fee Description	8021	40	8021	40		nes number of propertie mission after final reject			
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	375	(37 ČFR 1.1	129(a))			
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375		ditional invention to be 37CFR 1.129(b))			
1204 84 2204 42 ** Reissue independent claims over original patent	1801	750	2801	375	Request for	Continued Examination			
over original patent  1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for of a design	expedited examination application	1		
and over original patent	Other fee (specify)								
SUBTOTAL (2) (\$) 168.00	*Red	uced by	Basic F	iling Fee	e Paid	SUBTOTAL (3)	(\$)	0.00	
**or number previously paid, if greater; For Reissues, see above	<u> </u>								1

SUBMITTED BY		Complete (if applicable)
Name (Print/Type) Michele M. Wales	Registration No. (Attorpey/Agent) 43,975	Telephone (301) 610-5772
Signature ///	UWal	Date 4 8 2003
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